

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION		O	4-15
O.I.P.E. CLASSIFIER		8	4-19-79
FORMALITY REVIEW	YC	7817	4-27-79 6-30-79

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	5/10/79
Original	5/10/79
1	5/10/79
2	5/10/79
3	5/10/79
4	5/10/79
5	5/10/79
6	5/10/79
7	5/10/79
8	5/10/79
9	5/10/79
10	5/10/79
11	5/10/79
12	5/10/79
13	5/10/79
14	5/10/79
15	5/10/79
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19	5/10/79
20	5/10/79
21	5/10/79
22	N
23	N
24	N
25	N
26	N
27	N
28	N
29	÷ N
30	✓
31	✓
32	✓
33	✓
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41	✓
42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final	5/10/79
Original	5/10/79
51	5/10/79
52	5/10/79
53	-
54	=
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here